Recipient Committee	Type or print in	ink. CHTY C	LER bate Stamp	COVER PAGE
Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		MORENO RECE	VALLEY	california 460
(3076111116111 3006 366110113 34200-04210,0)	Statement covers period from	Date of election if applicable: (Month, Day, Real UC)	PH 3: 45	Page1 of6 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through06-30-18			
1. Type of Recipient Committee: All Committees -	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
 □ Officeholder, Candidate Controlled Committee □ State Candidate Election Committee □ Recall (Also Complete Part 5) ☑ General Purpose Committee □ Sponsored □ Small Contributor Committee □ Political Party/Central Committee 	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Terr ☐ Amendment (Explain belo	mination)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
3. Committee Information	I.D. NUMBER 1355432	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE	≣)	NAME OF TREASURER		
Concerned Citizens of Moreno Valley Advocac	cy Group	Craig R. Givens		
		MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)				
STREET ADDRESS (NO P.O. BOX)		CITY Marana Mallani		ZIP CODE AREA CODE/PHONE
CITY STATE ZIP (CODE AREA CODE/PHONE	Moreno Valley NAME OF ASSISTANT TREASURE		2555
Moreno Valley CA 925		Curtis L. Gardner	N, IF ANT	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	·	MAILING ADDRESS		
, ,				
CITY STATE ZIP (CODE AREA CODE/PHONE	CITY	STATE Z	IP CODE AREA CODE/PHONE
		Moreno Valley	CA 9	2553
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRES	SS	
. Verification	· · ·			
I have used all reasonable diligence in preparing and reviewi under penalty of perjury under the laws of the State of Califor	ng this statement and to the best of my kno nia that the foregoing is true	owledge the information contained herein	n and in the attached sc	hedules is true and complete. I certify
Executed on08/20/2018	D.			
Date	Ву		urer	*****
Executed on08/20/2018	Ву			
Date			nt or Responsible Officer of Spo	onsor
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State	Measure Proposent	
Executed on	By	5		
LAGUIEU UII	ФУ			

Date

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

06-30-18 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Craig R. Givens/Curtis L. Gardner 1355432 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 96.00 96.00 1. Monetary Contributions Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 742.00 742.00 838.00 838.00 20. Contributions SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 838.00 838.00 Made **Expenditures Made Expenditure Limit Summary for State** 742.00 742.00 **Candidates** 0.00 0.00 7. Loans Made Schedule H, Line 3 22. Cumulative Expenditures Made* 742.00 742.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 742.00 742.00 Current Cash Statement 90.00 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. add 96.00 amounts in Column A to the corresponding amounts 0.00 *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. 96.00 report. Some amounts in Column A may be negative 90.00 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ ___ carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 18. Cash Equivalents See instructions on reverse \$ ___ 742.00 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ __ FPPC Form 460 (January/05)

Schedule A Monetary Contributions Received		Amount	or print in ink. s may be rounded whole dollars.	from	vers period -01-18 6-30-18	FORM 460			
	ONS ON REVERSE	through		Page 3 of 6					
NAME OF FILER Craig R. Givens/Curtis L. Gardner					I.D. NUMBER 1355432				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YEAR TO I			LECTION DATE QUIRED)	
		□IND □COM □OTH □PTY □SCC							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		□IND □COM □OTH □PTY □SCC							
	*	☐IND ☐COM ☐OTH ☐PTY ☐SCC							
			SUBTOTAL	\$					
Amount re (Include al	A Summary ceived this period – itemized monetary contributions. Il Schedule A subtotals.)			00.00	IND- COM OTH	(other t	al ent Committe than PTY or (e.g., busine	SCC)	
2 T-4-1	A a management to the control of the form of the control of						andribustan Co		

3. Total monetary contributions received this period.

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

96.00

1	Type or print in ink. Amounts may be rounded			A range is		SCHEDULE B-PART 1 CALIFORNIA 460		
Schedule B – Part 1				Statement co	•			
Loans Received	to whole dollars.				from01	-01-18	FORM	400
SEE INSTRUCTIONS ON REVERSE					through0	6-30-18	Page 4	of6
NAME OF FILER							I.D. NUMBER	
Craig R. Givens/Curtis L. Gardner							1355432	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIV THIS PERIC	EN CLOSE OF THIS	DAID THIS	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Craig R. Givens Moreno Valley CA, 92555	Teacher MVUSD			PAID \$ 371.0 FORGIVEN	_	O RATE	s 742.00	s 6552.00 PER ELECTION**
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$	s	\$	DATE DUE	\$	DATE INCURRED	\$
Curtis L. Gardner Moreno Valley CA, 92553	Retired USAF Retired Educator			PAID S 371.0	_ "	O %	s 742.00	s 6552.00 PER ELECTION **
[†] ☑ IND □ COM □ OTH □ PTY □ SCC	MVUSD	\$	\$0.00	\$	DATE DUE	s	DATE INCURRED	\$
				PAID \$ FORGIVEN	\$	%	s	\$PER ELECTION**
† IND COM OTH PTY SCC		s	s	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	000 \$	742.0	00 \$ 11,500.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loans)				\$_	742.00	_		
Loans paid or forgiven this period	•			\$	0.00	IN	Contributor Codes ID – Individual OM – Recipient Co	
(Total Column (c) plus loans under \$100 (Include loans paid by a third party that			······································		O	other than) TH – Other (e.g., TY – Political Part	PTY or SCC) business entity) y	
Net change this period. (Subtract Line Enter the net here and on the Summary			•••••	NET \$ _	742.00 (May be a negative number)		CC – Small Contril	outor Committee
*Amounts forgiven or naid by another party also r	nust be reported on Schedule A)						

** If required.

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULED
Statement covers period		CALIFORNIA 160
from	01-01-18	FORM 460
through .	06-30-18	Page 5 of 6
		I.D. NUMBER
		4055400

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Craig R. Givens/Curtis L. Gardner 1355432 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DATE DESCRIPTION TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE ■ Monetary Contribution Nonmonetary Contribution ☐ Independent Expenditure ☐ Support ☐ Oppose Concerned Citizens of Moreno Valley Phone/Internet/Bank Fees 06-30-18 Contribution Advocacy Group 742.00 3664.00 ■ Nonmonetary Craig R. Givens - Curtis L. Gardner (Citizens' Contribution Led Charter) ✓ Independent Expenditure Support □ Oppose ■ Monetary Contribution Nonmonetary Contribution ☐ Independent Expenditure Support Oppose SUBTOTAL \$ 742.00 Schedule D Summary 742.00 0 2. Unitemized contributions and independent expenditures made this period of under \$100\$

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Craig R. Givens/Curtis L. Gardner	Type or prin Amounts may to whole o	be rounded		01-01-18 06-30-18	Page	CALIFORNIA FORM Page 6 0 I.D. NUMBER 1355432		
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	nmunications d appearance nses llating s survey resear ivery and me	es	RAD radio RFD return SAL camp TEL t.v. or TRC candi TRS staff/s TSF transf VOT voter	De the payment. airtime and production of the contributions aign workers' salaries cable airtime and producted travel, lodging, and spouse travel, lodging, a fer between committees registration nation technology costs	uction costs I meals and meals s of the sar	ne candid	late/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR DESC	CRIPTION OF PA	YMENT		АМО	UNT PAID
T-Mobile		OFC	Phone Expense				•	300
1 and 1 internet		WEB	Internet expense					346
Bank of America			Banking Fees					96
* Payments that are contributions or independent expenditures n	nust also be summ	arized on So	chedule D.		SUE	BTOTAL\$		742
Schedule E Summary								
1. Itemized payments made this period. (Include all Schedule	E subtotals.)	*****************	•••••	•••••	•••••	\$		742.00
2. Unitemized payments made this period of under \$100	•••••	************	•••••	***************************************		\$		0
3. Total interest paid this period on loans. (Enter amount from	Schedule B, Part 1	1, Column (e).)	•••••	********	\$		0

742.00